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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET					Application Number 10/516,596			Filing Date 05 September, 2006			☐ To be Mailed		
	Substitute	e for Form l	PTO-1360		Applicant(s) ZHANG, XINGE						Page 1 of 1		
					* May be used for additional claims or amendm						ents		
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 10/01/2008		AFTER SEC. AMENDMENT		*		*		*		
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1			X				51						
2				X			52						
3				X			53						
4				X			54						
5				X			55						
6				X			56						
7			1	X			57						
8			1	1			58 59						
10				1			60						
11				1			61						
12				X			62						
13				1			63						
14				1			64						
15				1			65						
16				1			66						
17				1			67						
18				1			68						
19				1			69						
20				4			70						
21				1			71						
22 23				1			72 73						
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42							92						
43 44							93 94						
44							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total			1				Total						
Indep							Indep						
Total Depend				16			Total Depend						
Total			1	7			Total						
Claims			·				Claims						

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